

Breakfast Form for SMI Records

Date: _____

Menu: _____

School: _____

Number Planned

Elementary _____

Middle or Junior High _____

High School _____

Adult _____

Meat/Meat Alternate _____

Convenience Item? **Yes** **No**

If **yes**, list item, brand, product code number and portion sizes below. Include nutrition information from label or manufacturer. If product has a CN label, include label with nutrient information.

If **no**, attach copy of recipe or complete section below for Meat/Meat Alternate Prepared.

Item	Brand	Item Number	Portion size*
_____	_____	_____	_____
_____	_____	_____	_____

*Indicate the number of pieces, ounces or grams per serving

Meat/Meat Alternate Prepared

(List all ingredients in recipe or include a copy)

Ingredient	Amount Used
_____	_____
_____	_____
_____	_____
_____	_____

Portion size _____	Yield _____
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Fruit/Vegetable

(List all ingredients in recipe or include a copy)

Fresh____Frozen____Canned____

Own juice____Light syrup____Heavy syrup____

Ingredient	Amount Used
_____	_____
_____	_____
_____	_____

Portion size _____	Yield _____
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Cereal

(List all types of cereal, serving size and number of servings)

Type	Serving Size	Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Juice

(List type of juice, serving size, and number of servings)

Type	Serving Size	Number
Orange	_____	_____
Apple	_____	_____
Grape	_____	_____
_____	_____	_____
_____	_____	_____

Bread Product/Prepared

(List all ingredients in recipe or include a copy)
Recipe for toast is to include the number of loaves
of bread and amount of butter or margarine used

Ingredient	Amount Used
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Portion size _____	Yield _____

Bread Product/Purchased

Obtain nutrient information and weight of one
serving (slice, bun, roll, etc).

Brand	Item Number
_____	_____

Portion size _____

Brand	Item Number
_____	_____

Portion size _____

Other foods (Examples: jelly, salsa, margarine,
peanut butter, honey)

Item	Portion size	Amount Used
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Milk

Number of half pints served of each type or %)

Skim _____	Chocolate Skim _____
1% _____	Chocolate 1% _____
2% _____	Chocolate 2% _____
Whole _____	

If using percentages, what percent of children
do not take milk? _____